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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
OR

Attorney Docket Number	I-2-0447.1US
First Named Inventor	Demir et al.
<i>COMPLETE IF KNOWN</i>	
Application Number	10/772,644
Filing Date	February 5, 2004
Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: _____

INITIAL CELL SEARCH IN WIRELESS COMMUNICATION SYSTEMS

the specification of which *(Title of the Invention)*

is attached hereto

OR

as United States Application Number or PCT International

Application Number: **10/772,644** and was amended on (MM/DD/YYYY) **10/02/2003** (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/445,331	February 5, 2003	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 4]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 1450, Alexandria, VA 22313-1450.

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number → *Place Customer Number Bar Code Label here*

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C.			

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number OR Correspondence address below

Name	VOLPE AND KOENIG, P.C. DEPT ICC				
Address					
Address					
City			State	ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
---------------------------------	---	--	--	--	--

Given Name (first and middle if any)	Family Name or Surname				
Alpaslan		Demir			

Inventor's Signature						Date	
----------------------	--	--	--	--	--	------	--

Residence: City	Commack	State	NY	Country	U.S.A.	Citizenship	Turkey
-----------------	---------	-------	----	---------	--------	-------------	--------

Post Office Address	50-04 Fairfield Way						
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Post Office Address							
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City	Commack	State	NY	ZIP	11725	Country	U.S.A.
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Attny. Docket No. I-2-0447.1US

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Donald M.		Grieco			
Inventor's Signature		Date			
Residence: City	Manhasset	State	NY	Country	U.S.A.
Citizenship					U.S.A.
Mailing Address 18 Shore Road					
Mailing Address					
City	Manhasset	State	NY	ZIP	11030
Country					U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
John W.		Haim			
Inventor's Signature		Date			
Residence: City	Baldwin	State	NY	Country	U.S.A.
Citizenship					U.S.A.
Mailing Address 1848 Longfellow Street					
Mailing Address					
City	Baldwin	State	NY	ZIP	11510
Country					U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Andrew F.		Bednarz			
Inventor's Signature		Date			
Residence: City	Garden City	State	NY	Country	U.S.A.
Citizenship					U.S.A.
Mailing Address 153 Tullamore Road					
Mailing Address					
City	Garden City	State	NY	ZIP	11530
Country					U.S.A.

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Attny. Docket No. I-2-0447.1US

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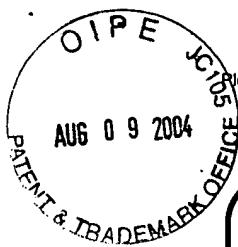
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Philip J.		Pietraski		
Inventor's Signature		Date		
Residence: City	Huntington Station	State	NY	Country
			U.S.A.	Citizenship
U.S.A.				
Mailing Address 7 Talbot Place				
Mailing Address				
City	Huntington Station	State	NY	ZIP 11746 Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Louis J.		Guccione		
Inventor's Signature		Date		
Residence: City	East Chester	State	NY	Country U.S.A.
				Citizenship U.S.A.
U.S.A.				
Mailing Address 211 Lincoln Place				
Mailing Address				
City	East Chester	State	NY	ZIP 10709 Country U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Prabhakar R.		Chitraru		
Inventor's Signature	<i>Prabhakar Chitraru</i>			Date <i>6/17/04</i>
Residence: City	Blue Bell	State	PA	Country U.S.A.
				Citizenship U.S.A.
U.S.A.				
Mailing Address 135 Brochant Drive				
Mailing Address				
City	Blue Bell	State	PA	ZIP 19422 Country U.S.A.

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Application Number	10/772,644
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the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) **February 5, 2004** as United States Application Number or PCT International

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

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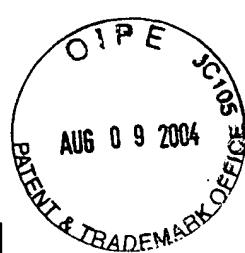
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)					
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 24374 → <input type="checkbox"/> Place Customer Number Bar Code Label here OR <input type="checkbox"/> Registered practitioner(s) name/registration number listed below							
Name	Registration Number	Name	Registration Number				
Namely, the Attorneys of Volpe and Koenig, P.C.							
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.							
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number 24374 <input type="checkbox"/> Correspondence address below							
Name	VOLPE AND KOENIG, P.C. DEPT ICC						
Address							
Address							
City	State	ZIP					
Country	Telephone	Fax					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Alpaslan		Demir					
Inventor's Signature	<i>Alpaslan Demir</i>			Date	7/13/04		
Residence: City	Commack	State	NY	Country	U.S.A.	Citizenship	Turkey
Post Office Address	50-04 Fairfield Way						
Post Office Address							
City	Commack	State	NY	ZIP	11725	Country	U.S.A.
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							



Attny. Docket No. I-2-0447.1US

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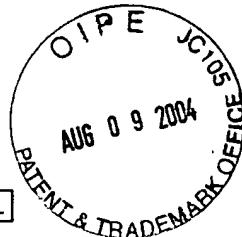
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Donald M.		Grieco		
Inventor's Signature	<i>Donald M. Grieco</i>		Date <u>7/13/04</u>	
Residence: City	Manhasset	State <u>NY</u>	Country <u>U.S.A.</u>	Citizenship <u>U.S.A.</u>
Mailing Address	18 Shore Road			
Mailing Address				
City	Manhasset	State <u>NY</u>	ZIP <u>11030</u>	Country <u>U.S.A.</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
John W.		Haim		
Inventor's Signature	<i>John W.</i>		Date <u>7/13/04</u>	
Residence: City	Baldwin	State <u>NY</u>	Country <u>U.S.A.</u>	Citizenship <u>U.S.A.</u>
Mailing Address	1848 Longfellow Street			
Mailing Address				
City	Baldwin	State <u>NY</u>	ZIP <u>11510</u>	Country <u>U.S.A.</u>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Andrew F.		Bednarz		
Inventor's Signature	<i>Andrew F. Bednarz</i>		Date <u>7/8/2004</u>	
Residence: City	Garden City	State <u>NY</u>	Country <u>U.S.A.</u>	Citizenship <u>U.S.A.</u>
Mailing Address	153 Tullamore Road			
Mailing Address				
City	Garden City	State <u>NY</u>	ZIP <u>11530</u>	Country <u>U.S.A.</u>

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Philip J.		Pietraski		
Inventor's Signature	---		Date <u>07/14/2004</u>	
Residence: City	Huntington Station	State	NY	Country
			U.S.A.	Citizenship
Mailing Address	7 Talbot Place			
Mailing Address				
City	Huntington Station	State	NY	Country
ZIP		11746	U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Louis J.		Guccione		
Inventor's Signature	<u>Louis J. Guccione</u>		Date <u>7/14/04</u>	
Residence: City	East Chester	State	NY	Country
			U.S.A.	Citizenship
Mailing Address	211 Lincoln Place			
Mailing Address				
City	East Chester	State	NY	Country
ZIP		10709	U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Prabhakar R.		Chitrapu		
Inventor's Signature				Date
Residence: City	Blue Bell	State	PA	Country
			U.S.A.	Citizenship
Mailing Address	135 Brochant Drive			
Mailing Address				
City	Blue Bell	State	PA	Country
ZIP		19422	U.S.A.	

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